

05-29-01

A Re-ISSUE

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PTO/SB/50 (02-01)

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REISSUE PATENT APPLICATION TRANSMITTAL

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Attorney Docket No.	CSUR.01USR1
First Named Inventor	Aubrey Poore
Original Patent Number	5,959,574
Original Patent Issue Date (Month/Day/Year)	Sept. 28, 1999
Express Mail Label No.	EL648663107US

APPLICATION FOR REISSUE OF:

(Check applicable box)

 Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

ACCOMPANYING APPLICATION PARTS

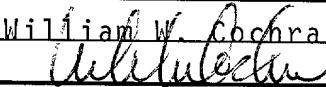
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|---|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing) | 10. <input type="checkbox"/> Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c). |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | 11. <input type="checkbox"/> Original U.S. Patent for surrender |
| 3. <input type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate) | <input type="checkbox"/> Ribboned Original Patent Grant |
| 4. <input type="checkbox"/> Drawing(s) (proposed amendments, if appropriate) | <input type="checkbox"/> Statement of Loss (PTO/SB/55) |
| 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52) | 12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable) |
| 6. <input type="checkbox"/> Power of Attorney | 13. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations |
| 7. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(If Yes, check applicable box(es)) | 14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable) |
| <input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) | 15. <input type="checkbox"/> Preliminary Amendment |
| <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (PTO/SB/96) | 16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) |
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| 9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary) | |
| a. <input type="checkbox"/> Computer Readable Form (CRF) | |
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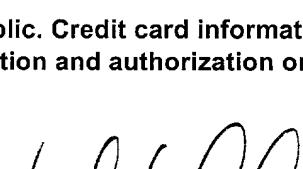
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NAME (Print/Type)	William W. Cochran	Registration No. (Attorney/Agent)	26,652
Signature		Date	5/24/01

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REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) CSUR.01USR1			
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A)	Total Claims (37 CFR 1.16(j))	(B)	****	x \$ _____ =		or	x \$ _____ =	
	Independent claims (37 CFR 1.16(i))		*	= x \$ _____ =			x \$ _____ =	
Basic Fee (37 CFR 1.16(h))					\$355			
Total Filing Fee					\$355			
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee					\$355.00	OR		
* If the entry in (D) is less than the entry in (C), Write "0" in column 3.								
** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.								
*** After any cancellation of claims.								
**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).								
***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).								
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-1491</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>355.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
<i>5/24/01</i> Date					 Signature of Applicant, Attorney or Agent of Record			
					<u>William W. Cochran II</u> Typed or printed name			

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IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE REISSUE
APPLICATION OF: Aubrey B. Poore Jr.

PATENT NO. 5,959,574

ISSUED: September 28, 1999

TITLE: METHOD AND SYSTEM FOR TRACKING MULTIPLE
REGIONAL OBJECTS BY MULTI-DIMENSIONAL
RELAXATION

THE HONORABLE COMMISSIONER OF PATENTS AND TRADEMARKS
WASHINGTON, D.C. 202031

Claim for Benefit Under 35 U.S.C. 119(a)

Sir:

1. I, **Aubrey B. Poore**, declare that my residence, post office address and citizenship are as stated below next to my name, and I that, I am the sole named inventor in United States Patent No. **5,959,574** dated **September 28, 1999**, and entitled "**METHOD AND SYSTEM FOR TRACKING REGIONAL OBJECTS BY MULTI-DIMENSIONAL RELAXATION**".
 2. I hereby claim benefit under 35 U.S.C. 120/365 of all United States and PCT international applications listed below and, insofar as the subject matter of each claim of this application is not disclosed in such prior application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information material to patentability in accordance with 37 CFR 1.56(a) and (b) which occurred between the filing date(s) of the prior application(s) and the national or PCT filing date of this application.

Application Serial No. Filing Date Status: patented, pending, abandoned

08/404,024 March 14, 1995 Patented

3. I acknowledge my duty to disclose to the United States Patent and Trademark Office all information known to me to be material in the patentability of the claimed invention.
 4. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are

believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Signature



Inventor's Name:

Aubrey B. Poore

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U.S.A.

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Fort Collins, Colorado 80525

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